STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Mobridge Tribune		2. DATE Sept. 14,2011
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE $ $40
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 1413 East Grand Crossing, Walworth County, Mobridge, SD 57601		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 1413 East Grand Crossing, Mobridge, SD 57601		
6. FULL NAME OF PUBLISHER: Bart McDowell		

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
Bridge City Publishing, Inc.	1413 East Grand Crossing, Mobridge, SD 57601

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

Dacotah Bank, PO Box 910, 320 Main Street, Mobridge, SD 57601

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	3000	3000
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	1135	1136
2. Mail Subscription (Paid and or requested)	1649	1689
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	2784	2825
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	9	9
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	2793	2834
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	129	92
2. Return from News Agents	78	74
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	3000	3000

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

(Signature)

PUBLISHER
(Title)

State of South Dakota)
§
County of Walworth)

Sworn to before me this 30th day of September 2011

Notary Public

My commission expires: 9-9-2017

(Seal)

CARISSA L. BOHLANDER
NOTARY PUBLIC
SOUTH DAKOTA
SEAL SEAL

Form: SOS REC 051 7/2004

#7 continued

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Mobridge, SD 57601

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